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|--|---|------------------------|--------------------|
| <h1 style="text-align: center;">TRANSMITTAL<br/>FORM</h1> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p> |   | Application Number     | 10/821,584         |
|  |   | Filing Date            | April 9, 2004      |
|  |   | First Named Inventor   | Terrance P. SNUTCH |
|  |   | Art Unit               | 1614               |
|  |   | Examiner Name          | N. Blakely III     |
| Total Number of Pages in This Submission   | 5 | Attorney Docket Number | 381092000623       |

**ENCLOSURES (Check all that apply)**

|  |  |  |         |                    |
|--|--|--|---------|--------------------|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement – Supplemental (3 pages)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC ( <b>Appeal Notice, Brief, Reply Brief</b> )<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):<br>Form PTO/SB/08A/B (1 page)<br>References (3) |         |                    |
| <table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">Remarks</td> <td>CUSTOMER NO. 25225</td> </tr> </table>   |  |  | Remarks | CUSTOMER NO. 25225 |
| Remarks  | CUSTOMER NO. 25225   |  |         |                    |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                         |          |        |
|--------------|-------------------------|----------|--------|
| Firm Name    | MORRISON & FOERSTER LLP |          |        |
| Signature    | /Kate H. Murashige/     |          |        |
| Printed name | Kate H. Murashige       |          |        |
| Date         | May 20, 2009            | Reg. No. | 29,959 |